

Work Order ID 105278

D3196-3  
B105278

\*105278\*

August-01-13 11:22:20 AM

Page 1

Item ID: D3196-3

Accept

\*N900040100\*

Setup Start

\*NS1\*

Revision ID:

Stop

\*NS2\*

Item Name: Bar

Start Date: 8/01/13

Start Qty: 4.00  
*120*  
**\*4\***

Cust Item ID:

Required Date: 8/01/13

Req'd Qty: 4.00  
**\*4\***

Customer:

Reference:

Approvals:

Process Plan: *MCLJ*

Date: 13-08-03 Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
D3196	Rev C

100  
**\*100\*** BAND SAW  
Bandsaw Memo 0.00  
Jeaspas Bandsaw Cut blank: (0.75" x 1.50") x 34.750" long Bar

*12 8* *8/13/09/23*

110  
**\*110\*** HAAS CNC VERTICAL MACHINING #1  
HAAS 1 Memo 0.00  
HAAS CNC vertical machine #1 1-Machine D3196-3 as per Folio FA339 and Dwg D3196 identify as D3196-32-  
Deburr

*12* *8/13-9-24*

120 QC2- Inspect parts off machine FAI/FAIB 0.00  
**\*120\*** QC Memo 0.00  
Quality Control

*8/13-9-24*

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: JW Date: 13/10/03QA Closed: OK Date: 13/10/21

Work Order:	<u>105278</u>	DISPOSITION				AGAINST DEPARTMENT/PROCESS				
Part No.	<u>D3196-3</u>	Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering
NCR No.	<u>13-2086</u>	Scrap	<input checked="" type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality
		Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other
		Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling	<u>13-9-24</u>	110	1	1 part scrap - part was flipped wrong way for 2nd off  R.C. operator even	<u>DAS 16 9-89</u>  <u>B12042</u> <u>B16124</u> <u>SM</u>	<u>SCRAP REPLACE</u>  <u>B126647</u>  <u>AMOUNT \$93.76</u>	<u>SL</u>  <u>13-9-24</u>		<u>DAS 16 9-89</u>  <u>13-9-24</u>  <u>Q220112</u>
Operator	<u>X</u>								
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

## FAULT CATEGORY

Landing Gear	General			
Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced
Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure
Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld
Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled
Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved	
Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other
Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	
Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset		
Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration		
Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence		
Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions		

Work Order ID 105278

\*105278\*

Page 2

August-01-13 11:22:20 AM

Item ID: D3196-3

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Stop

\*NS2\*

Item Name: Bar

Start Date: 8/01/13 Start Qty: 4.00

\*4\*

Cust Item ID:

Required Date: 8/01/13 Req'd Qty: 4.00

\*4\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

\*130\*

QC

Quality Control

QC8- Inspect parts - second check

0.00

✓ 13/09/25

12 0

140

\*140\*

HandFinish

Hand Finishing

Chemical Conversion Coat per QSI005 4.1

0.00

12 76 13.9.26

Memo

0.00

150

\*150\*

Powdercoat

Powder Coating

Grey Sandtex(Ref:4.3.5.6) per QSI005 4.3

0.00

Memo

7:45  
0.00

START TIME:

OVEN TEMPERATURE:

FINISH TIME:

8:15

12 x 0M-13/09/27

W 125028

320°F

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS															
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description			Sign & Date	Verification	QC Inspector									
Doc/Data																					
Equip/Tooling																					
Operator																					
Material																					
Setup																					
Other																					
Process																					
Supplier																					
Training																					
Unapproved																					
FAULT CATEGORY																					
Landing Gear	General				Grain				Ovalized				Pressure/Forced								
	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure								
	Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld								
	Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled								
	Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved								
	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	Part Moved												
	Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>	Positioned Wrong												
	Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Power Loss/Surge												
	Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>	Other	<input type="checkbox"/>	Other												
	Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>													
	Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>													
	Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>													

Work Order ID 105278

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\*105278\*

Page 3

Item ID: D3196-3

Accept

\*N900040100\*

Setup Start

\*NS1\*

Revision ID:

Stop

\*NS2\*

Item Name: Bar

Start Date: 8/01/13 Start Qty: 4.00

\*4\*

Cust Item ID:

Required Date: 8/01/13 Req'd Qty: 4.00

\*4\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

160

QC3- Inspect Part Finish

0.00

\*160\*

QC

Quality Control

121 4 11 13/09/13

170

Identify as per dwg & Stock Location:

87259

0.00

\*170\*

Packaging

Packaging

Memo

0.00

121 \_\_\_\_\_ D15  
626 69

13 9-30

180

QC21- Final Inspection - Work Order Release

0.00

\*180\*

QC

Quality Control

Memo

0.00

J/Rm 13/09/13  
MF  
(3) 9-30

DQA:

Date:

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed:

Date:

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS						
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____  NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <hr/> <hr/> <hr/> <hr/>	
										<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <hr/> <hr/> <hr/> <hr/>	
										<input type="checkbox"/> Other	

**Picklist Print**

August-01-13 11:22:20 AM

Page 1 / 1

Work Order ID: 105278

Parent Item: D3196-3

Parent Item Name: Bar

Start Date: 8/01/13

Required Date: 8/01/13

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev: A New Issue 05-11-08 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M6061T6B0.750X01.500 6061-T6 Bar .750 X 1.50		Purchased	No			100	f	4.0758	2.89	12.168421 <u>38.000</u>		13-09-23	

Location	Loc Qty	Loc Code
MAT049	4.07582	
122753	0.085	
m125771	1.22452	
m126351	2.7663	
<u>126647</u>		
		<u>38.000</u>

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

# **WORK ORDER NON-CONFORMANCE / UPDATE**

**QA Closed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <hr/> <hr/> <hr/>							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <hr/>							
				<input type="checkbox"/> Other							

DART AEROSPACE LTD	Work Order:	105278
Description: Bar	Part Number:	D3196-3
Inspection Dwg: D3196 Rev: C		Page 1 of 1

### FIRST ARTICLE INSPECTION CHECKLIST

First Article     Prototype

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
34.625	+/-0.010	34.625	/		m-tape	SL-8
33.650	+/-0.005	33.650	/			
0.488	+/-0.005	488	/		Vern	SL-10
17.011	+/-0.010	17.011	/			
0.512	+/-0.005	516	/		-	
1.500	+/-0.010	1.506	/		-	
0.464	+/-0.010	462	/		-	
0.504	+/-0.010	501	/		-	
Ø0.344	+0.006/-0.001	344	/		-	
Ø0.660 x 100°	+0.008/-0.001 x 0.5°	660x100°	/		-	
0.962	+/-0.005	966	/		-	
0.750	+/-0.010	754	/		-	
4.750	+/-0.010	4.750	/		-	
12.531	+/-0.010	12.531	/			
16.999	+/-0.010	16.999	/			
21.844	+/-0.010	21.844	/			
29.625	+/-0.010	29.625	/			
0.250	+/-0.010	.25	/			
1.000	+/-0.010	1.001	/			
R0.125	+/-0.010	125	/			
0.987	+/-0.010	987	/			
0.060 x 45°	+/-0.010 x 0.5°	.060x45°	/			

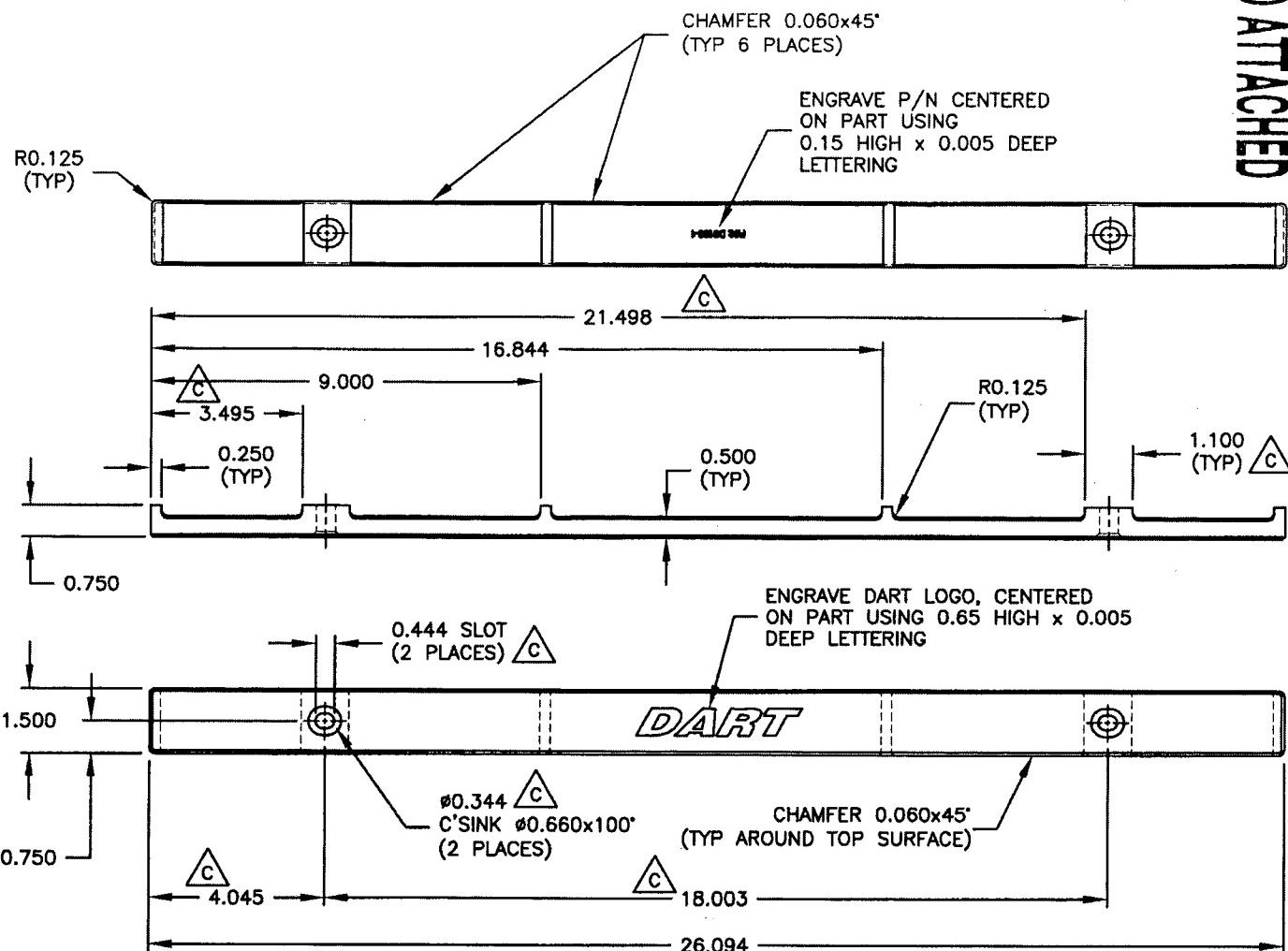
Measured by:	<u>SL</u>	Audited by:	<u>SM</u>	Prototype Approval:	N/A
Date:	13-9-25	Date:	13/09/25	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	04.04.20	New Issue	KJ/RF	
B	06.10.24	Dwg Rev. updated	KJ/JLM	
C	07.05.08	Dwg Rev. updated	KJ/JLM <u>SL</u>	<u>SL</u>

**DART****DEO ATTACHED**RELEASED  
06.10.31

DESIGN	DRAWN BY	<b>DART AEROSPACE LTD</b>
CHECKED	APPROVED	HAWKESBURY, ONTARIO, CANADA
DATE		DRAWING NO.
06.10.31	<i>PH</i>	D3196
A	03.06.25	NEW ISSUE
B	06.09.25	ADD D3196-5
C	06.10.31	ADD SLOTS ON -1; REMOVED -5

REV. C  
SHEET 1 OF 3  
SCALE 1:4

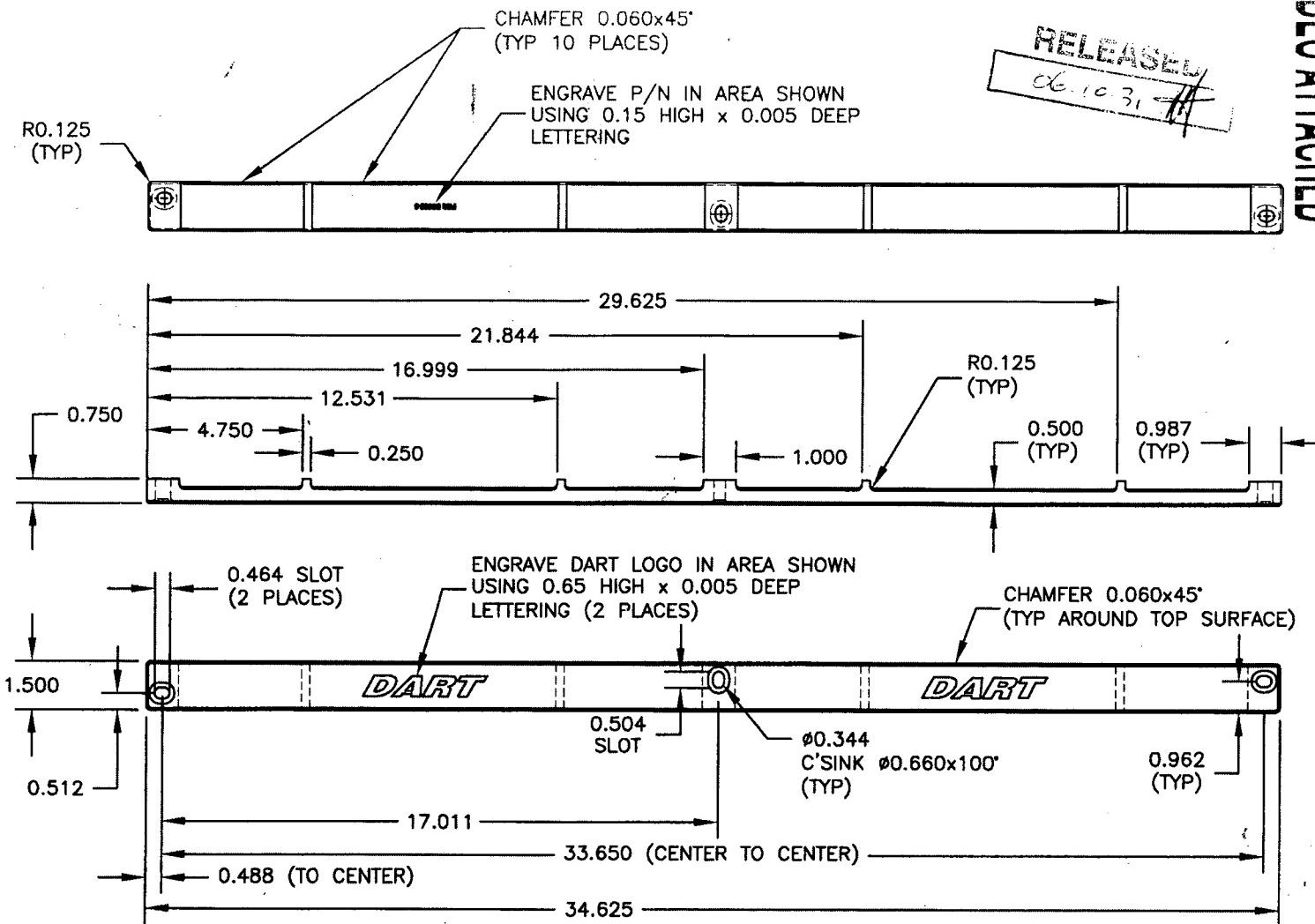
**D3196-1 BAR**

- 1) MATERIAL: 6061-T6/T651 ALUMINUM (QQ-A-200/8 OR QQ-A-225/8)  
(REF DART SPEC. M6061T6B)
- 2) BREAK ALL SHARP EDGES 0.005 TO 0.010
- 3) FINISH: ACID ETCH AND ALODINE PER DART QSI 005 4.1  
POWDER COAT GREY SANTEX (4.3.5.6) PER DART QSI 005 4.3
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) ALL DIMENSIONS ARE IN INCHES

105278

**DEO ATTACHED**

**RELEASED**  
06.10.31

**DART****D3196-3 BAR**

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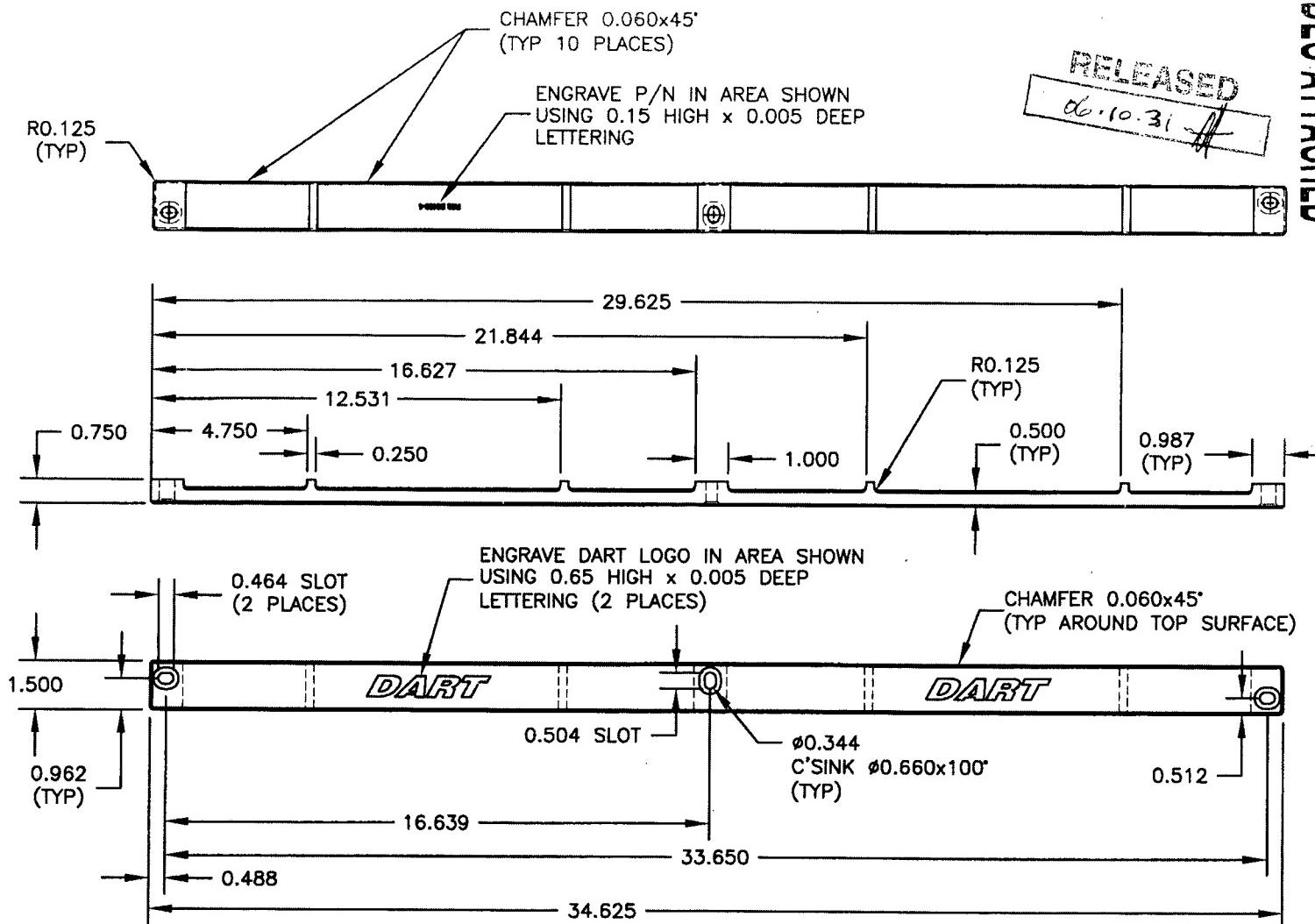
DESIGN	DRAWN BY	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA
CHECKED	APPROVED	DRAWING NO. D3196
DATE 06.10.31		TITLE BAR

REV. C  
SHEET 2 OF 3  
SCALE 1:5

105278

**DEO ATTACHED**

RELEASED  
06.10.31

**D3196-4 BAR**

- 1) MATERIAL: 6061-T6/T651 ALUMINUM (QQ-A-200/8 OR QQ-A-225/8)  
(REF DART SPEC. M6061T6B)
- 2) BREAK ALL SHARP EDGES 0.005 TO 0.010
- 3) FINISH: ACID ETCH AND ALODINE PER DART QSI 005 4.1  
POWDER COAT GREY SANTEX (4.3.5.6) PER DART QSI 005 4.3
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) ALL DIMENSIONS ARE IN INCHES

DESIGN	DRAWN BY	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA
97	JL	REV. C
CHECKED	APPROVED	DRAWING NO.
06.10.31		D3196
		SHEET 3 OF 3
		SCALE
		1:5

105278

DRAWING NO.  
D3196TITLE  
BAR

REV. C

DART AEROSPACE LTD  
ENGINEERING ORDERSHEET NO.  
D3196-C-1

SHEET 1 OF 2

NTS

DRAWN *AJS*CHECKED *J*MFG. APPR. *91*APPROVED *NP*DE APPR. *#*

DATE 08.08.27

DATE 08.08.28

DATE 08.08.29

DATE 08.08.29

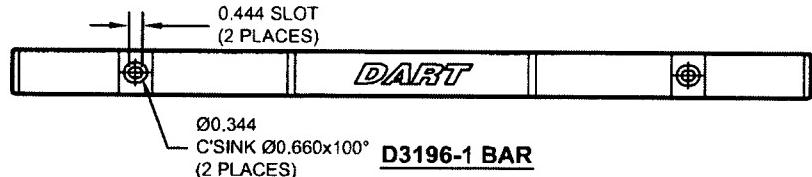
DATE 08.09.04

SHEET 1 MODIFY SLOT DIMENSIONING ON D3196-1 AS SHOWN:

IS:

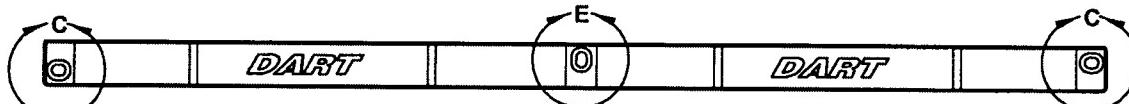
D3196-1 BAR

WAS:

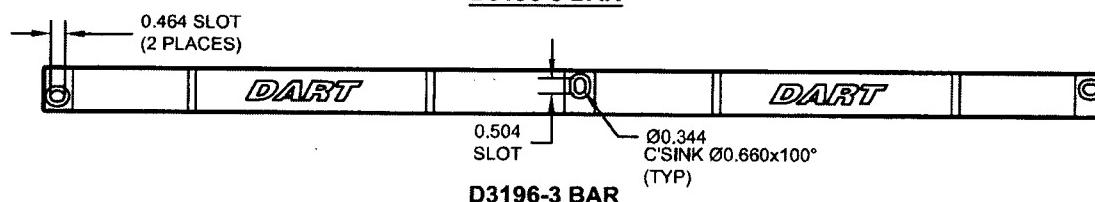
D3196-1 BAR

SHEET 2 MODIFY SLOT DIMENSIONING ON D3196-3 AS SHOWN:

IS:

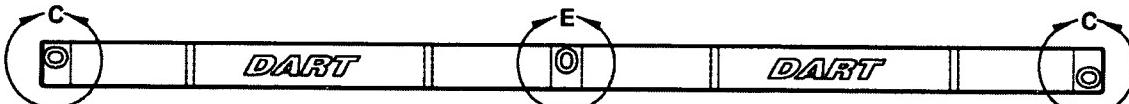
D3196-3 BAR

WAS:

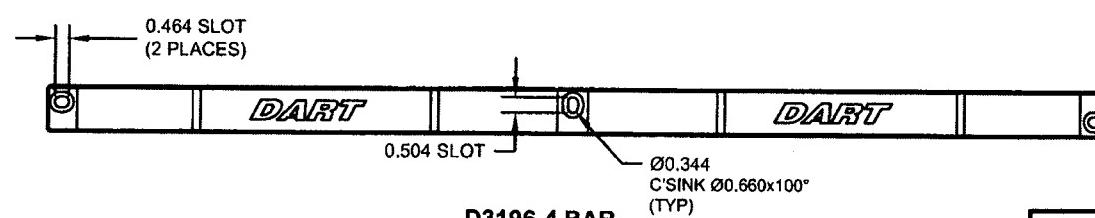
D3196-3 BAR

SHEET 3 MODIFY SLOT DIMENSIONING ON D3196-4 AS SHOWN:

IS:

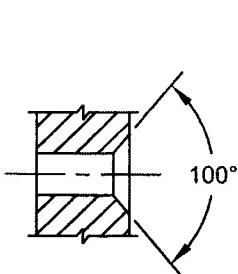
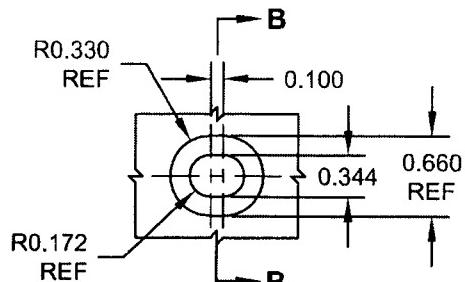
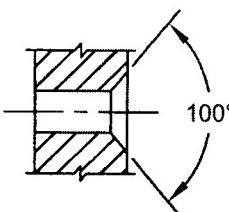
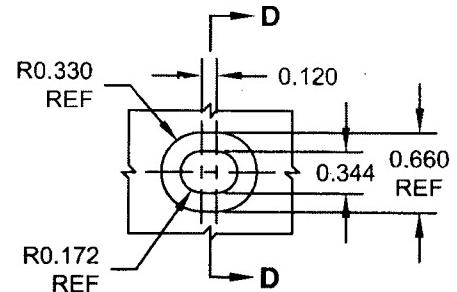
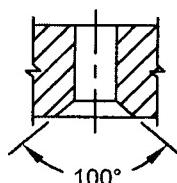
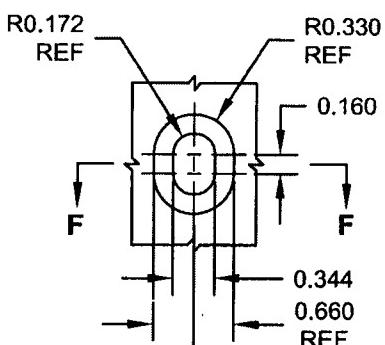
D3196-4 BAR

WAS:

D3196-4 BAR

105278

D3196	BAR	REV. C	DART AEROSPACE LTD ENGINEERING ORDER	DRAWN D3196-C-1	SHEET 2 OF 2
DRAWN <i>AJS</i>	CHECKED <i>AS</i>	MFG. APPR. <i>SH</i>	APPROVED <i>NP</i>	DE APPR. <i>HF</i>	NTS
DATE 08.08.27	DATE 08.08.28	DATE 08.08.29	DATE 08.08.29	DATE 08.09.04	

SECTION B-BDETAIL ASECTION D-DDETAIL CSECTION F-FDETAIL E

NOTE: THIS CHANGE HAS BEEN DONE TO CLARIFY SLOT DIMENSIONS ONLY. NO CHANGES HAVE BEEN MADE TO THE PARTS  
 SEE NCR 08-051 FOR FURTHER INFORMATION  
 ALL OTHER INFORMATION REMAINS UNCHANGED